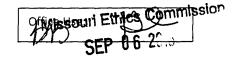


Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov



Statement of Committee Organization

. Statement Information	on		
Date: 9/1/16		16 510 & section of	shongod)
	mended (if amending, enter MEC ID	(16 1010 & section of	changed
	t Tony Pousosa		
9700 Antigo Dri	700 Antigo Drive, St. Louis, MO 63123		(314) 517-1482
		St. Louis County	Telephone Number
Official Committee Email Address	Campaign Candidate Continuing	County Clerk or Board of Election Commis	
Treasurer/Deputy Tre		(PAC) Debt Service LA	pioratory
Jason Coleman			y 1000 .
Treasurer's Name (First & Last)		Headnice o Fillian Mariesa (shire)	
14478 Ladue Ro	oad, Chesterfield, MO 63017	, 314 _, 780-6922	(314) 780-6922
Treasurer's Mailing Address, City,	State, & Zip	Treasurer's Home Telephone Number	Treasurer's Work Telephone Number
Deputy Treasurer's Name (if one a	appointed)	Deputy Treasurer's Email Address (option	al)
Deputy Treasurer's Mailing Addres	ss. Citv. State. & Zip	Dep. Treasurer's Home Telephone Numbe	() er Dep. Treasurer's Work Telephone Number
Additional Committee	e Information	***	
Additional Committee Officer's Na	rme & Title (if any)	Additional Committee Officer's Mailing Ac	ddress, City, State, & Zip
Connected Organization's Name (i	f any)	Connected Organization's Mailing Address	s, City, State, & Zip
CANDIDATES: Do you	have more than one candidate committe	e? Yes (refer to instructions of	n back) 🔀 No
	Information (required by all committees		TOUR TOUR
			, woodang (Tulling)
Candidate Supported	or Opposed (candidate committees mus	t_include self. if candidate)	n and the same of
Candidate Supported or Opposed (candidate committees must Tony Pousosa, 9700 Antigo Drive, St. Louis, MO 63123		(314)517-1482	April 10 miles marined 2 through (2012) and (10 miles and 10 miles and
Name & Mailing Address, City, Stat		Telephone Number (Candidate Committee	es Only)
3/7/17	MunicipalCity of Green Park	non-partisan	Support
Election Date	Office Sought & Political Subdivision	Political Party	Support or Oppose
Ballot Measure Suppo	orted or Opposed (campaign committees	must complete this section)	
Name of Ballot Measure		Election Date & Political Subdivision	Support or Oppose
Signature(s) Check co	ertification(s) & sign (required by all com	mittees)	
	nder penalty of perjury that information a		plete, true, and accurate.
	and I am aware that any false statement o	·	•
(MAI)		Att Park	, so 1
Committee Treasurer		Candidate (Candidate Committees Only)	<i>v c</i>